

G O D W I N G R U B E R

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November 19, 2001

**VIA EXPRESS MAIL**

**EL858167275US**

Assistant Commissioner for Patents  
Washington, D.C. 20231

Re: Patent Application For  
**Low Capacitance Coupling Wire Bonded Semiconductor Device**  
Attorney Docket No. TI-31189  
Our File: 50000.2163

Dear Sir:

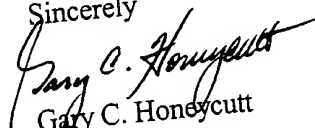
Enclosed for filing please find the following items relating to the above-identified application:

- (1) Non-Provisional Application/Fee Authorization/transmittal Form ;
- (2) Declaration, and Power of Attorney;
- (3) Recordation Form Cover Sheet with Assignment;
- (4) Specifications and Formal Drawings; and
- (5) Postcards.

Please charge **Deposit Account No. 20-0668** in the amount of the total fees set forth. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to **Deposit Account No. 20-0668**.

Please file the application and return the date-stamped postcard to the corresponding addresses as indicated. In the meantime, if you have any questions or comments concerning this matter, please call the undersigned. Otherwise, please accept the enclosed.

Sincerely

  
Gary C. Honeycutt  
Reg. No. 20,250

GCH/ecc  
Enclosure  
cc: Larry Bassuk, Texas Instruments Incorporated



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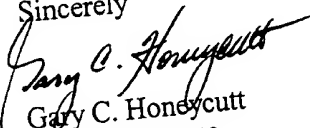
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11/20/01  
J1040 U.S. PTO

NON-PROVISIONAL APPLICATION FOR U. S. PATENT UNDER 37 CFR 1.53(b)  
TRANSMITTAL FORM

J1040 U.S. PTO  
09/989263  
10/19/01

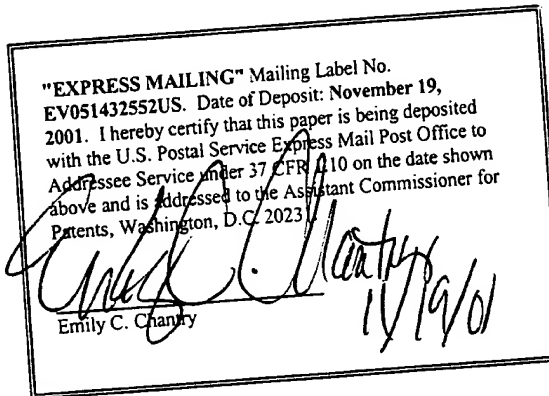
Attorney Docket No. TI-31189

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Sir:

Transmitted herewith for filing is the  
patent application of:

Inventor(s): Michael A. Lamson  
Homer B. Klonis



For: Low Capacitance Coupling Wire Bonded Semiconductor Device.

Enclosed are:

- 3 Sheets of formal drawings and 19 pages of Specification (including Abstract)  
X A Declaration/Power of Attorney  
X Assignment with form PTO 1595

Please amend the specification by inserting before the first line the sentence:  
This application claims priority under 35 USC § 119 based upon **Provisional Patent**  
**Application number 60/252,126, filed 11/20/00.**

FEE CALCULATION					FEE
	NUMBER		NUMBER EXTRA	RATE	BASIC FEE \$ 740.00
Total Claims	17	- 20 =	0	X \$18 =	\$0.00
Independent Claims	4	- 3 =	1	X \$84 =	\$84.00
Total Filing Fee					\$824.00

Please charge Deposit Account No. 20-0668 in the amount of the Total Fees set forth. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 20-0668. This form is submitted in triplicate.

All correspondence related to this application may be addressed to the undersigned at Godwin Gruber, P.C. 801 E. Campbell Rd. Suite 655, Richardson, TX 75081.

Date: November 19, 2001

*Gary C. Honeycutt*  
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